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**Profile of the New Tuberculosis Epidemiologic Studies Consortium
in the United States and Canada, 2001 – 2002**

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Background: In 2001, the CDC funded the creation of a new Tuberculosis Epidemiologic Studies Consortium (TBESC) composed of 22 individual member-sites (each having a formal linkage between a local academic institution and state or metropolitan departments of health) from the United States (20) and Canada (2). TBESC will conduct multi-site epidemiologic, behavioral, economic, laboratory, and operational research over the next 10 years.

Methods: In July 2002, TBESC members completed a 17-item, web-based, cross-sectional survey that gathered data about their primary and extended catchment areas and information on the respective populations under study and the scope and characteristics of their 2001 TB case-patient population. We compared these data to that reported in 2001 from the United States and Canada.

Results: In 2001, from a primary catchment area with a population under study of 122.7 million persons (38.8% of the 316.3 million persons in the United States and Canada), TBESC reported approximately 10,000 TB case-patients (56% of the total 17,683). The TB incidence rate collectively in TBESC of 8/100,000 persons was greater than the combined United States and Canadian incidence rate of 5.6/100,000 persons. Sixty percent (5,687) of TB case-patients reported from the 20 U.S. TBESC sites were foreign-born, compared to 49% from the entire United States. Other epidemiologic features of TB case-patients within the TBESC, such as age and sex, were similar to those of the respective national data.

Conclusion: In 2001, the 22 TBESC members reported the majority of TB case-patients from the United States and Canada. While there were differences between the TB case-patients in TBESC and the overall national TB case-patient population, these findings suggest that there exists sufficient quantity, completeness, and diversity among TB case-patients represented by TBESC to conduct the types of multi-site research studies needed to address the important scientific questions of how to improve TB prevention and control in both the United States and Canada.